

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Massachusetts Republican State Congressional Committee

ADDRESS (number and street)

85 Merrimac Street, Suite 400

☐Check if different
than previously
reported. (ACC)

Boston

MA

02114

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00042622

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☒

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

03

01

2008

through

03

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Brent Andersen

Signature of Treasurer

Electronically Filed by Brent Andersen

Date

12

08

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Massachusetts Republican State Congressional Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		17130.28
(b) Cash on Hand at Beginning of Reporting Period	85841.02	
(c) Total Receipts (from Line 19)	55369.00	275653.50
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	141210.02	292783.78
7. Total Disbursements (from Line 31)	95765.64	247339.40
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	45444.38	45444.38
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Massachusetts Republican State Congressional Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	32510.00	200610.00
(i) Itemized (use Schedule A)	17859.00	64933.50
(ii) Unitemized	50369.00	265543.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	5000.00	10000.00
(c) Other Political Committees (such as PACs)	55369.00	275543.50
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	110.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	55369.00	275653.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	55369.00	275653.50

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	80916.68	206674.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	80916.68	206674.47
22. Transfers to Affiliated/Other Party Committees.....	5000.00	15000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	9848.96	25664.93
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	9848.96	25664.93
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	95765.64	247339.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	95765.64	247339.40

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	55369.00	275543.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	55369.00	275543.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	80916.68	206674.47
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	110.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	80916.68	206564.47

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Mariann Appley

Mailing Address 2 Commonwealth Avenue

City

Boston

State

MA

Zip Code

02116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 8 / 2 0 0 8

Transaction ID: 80414.C168676

Amount of Each Receipt this Period

200.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Michael Brockelman

Mailing Address 127 Highland St.

City

Holden

State

MA

Zip Code

01520

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bowditch & Dewey

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 2 / 2 0 0 8

Transaction ID: 80314.C168490

Amount of Each Receipt this Period

1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Robert Carter

Mailing Address 183 Hayward Mill Road

City

Concord

State

MA

Zip Code

01742

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 7 / 2 0 0 8

Transaction ID: 80317.C168574

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 44

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Robert Carter

Mailing Address 183 Hayward Mill Road

City

Concord

State

MA

Zip Code

01742

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80414.C168761

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Forrester Clark

Mailing Address 308 Sagamore St.

City

Hamilton

State

MA

Zip Code

01982

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
State Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 3 / 2 0 0 8

Transaction ID: 80314.C168529

Amount of Each Receipt this Period

110.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Mark Cohen

Mailing Address 125 Chestnut Street

City

Concord

State

MA

Zip Code

01742

FEC ID number of contributing
federal political committee.

C

Name of Employer
Office Paper Recovery Sys.
Inc

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80414.C168895

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2710.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 8 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Robert Danner

Mailing Address 48 Seabury Point Road

City

Duxbury

State

MA

Zip Code

02332-5203

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 8 / 2 0 0 8

Transaction ID: 80414.C168602

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

James Desmarais

Mailing Address 148 Lakeshore Dr.

City

Dracut

State

MA

Zip Code

01826

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80414.C168826

Amount of Each Receipt this Period

200.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Jody Dow

Mailing Address 71 Leicester Street

City

Brookline

State

MA

Zip Code

02445

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dr. Elias Dow

Occupation
Office Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: 80314.C168354

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Jeanie Falcone

Mailing Address 80 Hancock Ave.

City

Brockton

State

MA

Zip Code

02301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80414.C168827

Amount of Each Receipt this Period

200.00

Receipt

B.

Full Name (Last, First, Middle Initial)

M. Dozier Gardner

Mailing Address 100 Upland Road

City

Brookline

State

MA

Zip Code

02445

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 4 / 2 0 0 8

Transaction ID: 80314.C168251

Amount of Each Receipt this Period

1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Nelson Gifford

Mailing Address 224 Converse Rd.
DO NOT MAIL

City

Marion

State

MA

Zip Code

02738

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80414.C168756

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

William Hart

Mailing Address PO Box 39

City

Yarmouth

State

MA

Zip Code

02664

FEC ID number of contributing
federal political committee.

C

Name of Employer
EDP Contract Serv.

Occupation

Computer Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80414.C168759

Amount of Each Receipt this Period

200.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Thomas Hazen

Mailing Address 17 College View Hts

City

South Hadley

State

MA

Zip Code

01075

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hazen Paper Company

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 8 / 2 0 0 8

Transaction ID: 80318.C168576

Amount of Each Receipt this Period

350.00

Receipt

C.

Full Name (Last, First, Middle Initial)

John Henson

Mailing Address 37 Thomas Rd.

City

Swampscott

State

MA

Zip Code

01907

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mass General Hospital

Occupation

Doctor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 3 / 2 0 0 8

Transaction ID: 80314.C168534

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 / 44

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Miles Herter

Mailing Address 12 Boardman Ave.

City

Manchester

State

MA

Zip Code

01944

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80414.C168765

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Donald Irving

Mailing Address 71 Coney Street

City

Walpole

State

MA

Zip Code

02032

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 0 / 2 0 0 8

Transaction ID: 80414.C168631

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Ronald Kaufman

Mailing Address 401 Sixth Street, SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Dutko Group

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 3 / 2 0 0 8

Transaction ID: 80314.C168535

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Richard Lawton

Mailing Address 10 Alderwood Dr.

City

Easton

State

MA

Zip Code

02334

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 8 / 2 0 0 8

Transaction ID: 80414.C168628

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Jonathan Levin

Mailing Address 2 Brimmer St. #3

City

Boston

State

MA

Zip Code

02108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Skadden, Arps, Slate, Mea-
gher

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 6 / 2 0 0 8

Transaction ID: 80314.C168466

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

David McGrath

Mailing Address 7 West Hollow

City

Andover

State

MA

Zip Code

01810

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wignall Animal Hospital

Occupation
Veterinarian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 7 / 2 0 0 8

Transaction ID: 80317.C168570

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

John Nelson

Mailing Address 2 Avery Street, 36D

City

Boston

State

MA

Zip Code

02111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80414.C168834

Amount of Each Receipt this Period

1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Peter Nicholas

Mailing Address 58 Chestnut Street

City

Boston

State

MA

Zip Code

02108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Boston Scientific Corp.

Occupation
Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80414.C168941

Amount of Each Receipt this Period

10000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Richard Pien

Mailing Address 394 Marlborough St

City

Boston

State

MA

Zip Code

02115

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 3 / 2 0 0 8

Transaction ID: 80314.C168528

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

11500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Jacques Prindiville

Mailing Address 1550 Worcester Rd, Rt. 9
Chapel Hill West Unit 508

City State Zip Code
Framingham MA 01702-8931

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 6 / 2 0 0 8

Transaction ID: 80314.C168464

Amount of Each Receipt this Period

1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

John Sears

Mailing Address 7 Acorn St.

City State Zip Code
Boston MA 02108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 4 / 2 0 0 8

Transaction ID: 80314.C168253

Amount of Each Receipt this Period

500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

John Shaughnessy

Mailing Address 91 Longmeadow Rd.

City State Zip Code
Milton MA 02186

FEC ID number of contributing
federal political committee.

C

Name of Employer
Shaughnessy and Ahern

Occupation
Businessman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 4 / 2 0 0 8

Transaction ID: 80314.C168252

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Andrew Silinsh

Mailing Address 2 Blacksmith Rd

City

Chelmsford

State

MA

Zip Code

01824

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fidelity Investments

Occupation

Software Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 3 / 2 0 0 8

Transaction ID: 80314.C168546

Amount of Each Receipt this Period

200.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Jeffrey Speller

Mailing Address 60 Wellesley Rd.

City

Belmont

State

MA

Zip Code

02478

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 3 / 2 0 0 8

Transaction ID: 80314.C168533

Amount of Each Receipt this Period

150.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Jeffrey Speller

Mailing Address 60 Wellesley Rd.

City

Belmont

State

MA

Zip Code

02478

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 3 / 2 0 0 8

Transaction ID: 80314.C168532

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

John Spurr

Mailing Address 24 Crescent Avenue

City

Scituate

State

MA

Zip Code

02066

FEC ID number of contributing
federal political committee.

C

Name of Employer
AW Perry Inc

Occupation

Comm Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 4 / 2 0 0 8

Transaction ID: 80314.C168254

Amount of Each Receipt this Period

200.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Polly Townsend

Mailing Address 34 Proctor St

City

Manchester

State

MA

Zip Code

01944

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 3 / 2 0 0 8

Transaction ID: 80314.C168530

Amount of Each Receipt this Period

2500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Francis Venditti

Mailing Address 160 Warren Avenue

City

Seekonk

State

MA

Zip Code

02771

FEC ID number of contributing
federal political committee.

C

Name of Employer
seekonk speedway

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80414.C168767

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Christopher Vincze

Mailing Address 1 Eisenhaure Lane

City

North Reading

State

MA

Zip Code

01864

FEC ID number of contributing
federal political committee.

C

Name of Employer
TRC Companies

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 4 / 2 0 0 8

Transaction ID: 80414.C168659

Amount of Each Receipt this Period

1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Sinclair Weeks

Mailing Address 100 Newbury Ct., Apt. 502

City

Concord

State

MA

Zip Code

01742

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 7 / 2 0 0 8

Transaction ID: 80317.C168571

Amount of Each Receipt this Period

1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

D. Bradford Wetherell

Mailing Address 47 Fresh Pond Ln.

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing
federal political committee.

C

Name of Employer
Romney for President

Occupation
Policy Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 7 / 2 0 0 8

Transaction ID: 80317.C168572

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2200.00

TOTAL This Period (last page this line number only)

32510.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 44

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

General Electric PAC

Mailing Address 1299 Pennsylvania Ave, NW
Suite 900City State Zip Code
Washington DC 20004FEC ID number of contributing
federal political committee.**C** C00024869Name of Employer
PACOccupation
FEC ID: C00024869

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80414.C168942

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 44

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

American Legion Post 19

Mailing Address 124 Highland Avenue

City
Somerville

State
MA

Zip Code
02144-

Purpose of Disbursement
Hall Rental for Caucus

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80414.E10302

Date of Disbursement

03 / 20 / 2008

Amount of Each Disbursement this Period

300.00

HALL RENTAL FOR CAUCUS

B.

Full Name (Last, First, Middle Initial)

Blue Cross Blue Shield of Massachusetts

Mailing Address Landmark Center
401 Park Drive

City
Boston

State
MA

Zip Code
02215-

Purpose of Disbursement
Health Ins.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80414.E10296

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

882.92

HEALTH INS.

C.

Full Name (Last, First, Middle Initial)

Cambridge Offset Printing

Mailing Address 56 Creighton Street

City
Cambridge

State
MA

Zip Code
02140-

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80314.E10235

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

4173.75

PRINTING

SUBTOTAL of Disbursements This Page (optional)

5356.67

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 44

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Css Castle Self-Storage

Mailing Address 39 Old Colony Ave.

City
Boston

State
MA

Zip Code
02127-

Purpose of Disbursement
Storage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80414.E10279

Date of Disbursement

03 / 14 / 2008

Amount of Each Disbursement this Period

329.00

STORAGE

B.

Full Name (Last, First, Middle Initial)

Css Castle Self-Storage

Mailing Address 39 Old Colony Ave.

City
Boston

State
MA

Zip Code
02127-

Purpose of Disbursement
Starage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80414.E10267

Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

329.00

STARAGE

C.

Full Name (Last, First, Middle Initial)

DirecTV DirecTV

Mailing Address PO Box 60036

City
Los Angeles

State
CA

Zip Code
90060-0036

Purpose of Disbursement
Cable Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80414.E10268

Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

94.95

CABLE SERVICE

SUBTOTAL of Disbursements This Page (optional)

752.95

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 44

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

ENlisson ENilsson

Mailing Address 6 Depot Street

City
Westford

State
MA

Zip Code
01886-

Purpose of Disbursement
Web hosting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80314.E10250

Date of Disbursement

03 / 07 / 2008

Amount of Each Disbursement this Period

345.14

WEB HOSTING

B.

Full Name (Last, First, Middle Initial)

Federal Express (Fed Ex)

Mailing Address PO Box 371461

City
Pittsburgh

State
PA

Zip Code
15250-

Purpose of Disbursement
Express mail

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80314.E10232

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

52.57

EXPRESS MAIL

C.

Full Name (Last, First, Middle Initial)

Federal Express (Fed Ex)

Mailing Address PO Box 371461

City
Pittsburgh

State
PA

Zip Code
15250-

Purpose of Disbursement
Express Mail

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80414.E10280

Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

30.55

EXPRESS MAIL

SUBTOTAL of Disbursements This Page (optional)

428.26

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 44

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Federal Express (Fed Ex)

Mailing Address PO Box 371461

City
Pittsburgh

State
PA

Zip Code
15250-

Purpose of Disbursement
Express Mail

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80414.E10305

Date of Disbursement

/ /

Amount of Each Disbursement this Period

11.04

EXPRESS MAIL

B.

Full Name (Last, First, Middle Initial)

Garage Government Center

Mailing Address 50 New Sudbury Street

City
Boston

State
MA

Zip Code
02114-

Purpose of Disbursement
Parking

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80314.E10234

Date of Disbursement

/ /

Amount of Each Disbursement this Period

640.00

PARKING

C.

Full Name (Last, First, Middle Initial)

Guardian Guardian

Mailing Address Boston Group Office
1 Liberty Square

City
Boston

State
MA

Zip Code
02109-

Purpose of Disbursement
Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80414.E10263

Date of Disbursement

/ /

Amount of Each Disbursement this Period

408.56

INSURANCE

SUBTOTAL of Disbursements This Page (optional)

1059.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 44

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Lyndsay Jones

Mailing Address 16 Oval Road

City
Quincy

State
MA

Zip Code
02170-

Purpose of Disbursement
Reimbursement for Parking & Toll Expenditures

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80414.E10284

Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

109.30

REIMBURSEMENT FOR PARKING
& TOLL EXPENDITURES

B.

Full Name (Last, First, Middle Initial)

Lyndsay Jones

Mailing Address 16 Oval Road

City
Quincy

State
MA

Zip Code
02170-

Purpose of Disbursement
Reimbursement for Postage Expenditure

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80414.E10283

Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

65.00

REIMBURSEMENT FOR POSTAGE
EXPENDITURE

C.

Full Name (Last, First, Middle Initial)

Lyndsay Jones

Mailing Address 16 Oval Road

City
Quincy

State
MA

Zip Code
02170-

Purpose of Disbursement
Reimbursement for Postage & Office Supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80414.E10301

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

161.60

REIMBURSEMENT FOR POSTAGE
& OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

335.90

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Brett Kasper

Mailing Address 43 Eastern Ave. Apt. 3

City Lynn State MA Zip Code 01902-

Purpose of Disbursement
Internship

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80414.E10287

Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

700.00

INTERNSHIP

B.

Full Name (Last, First, Middle Initial)

Brett Kasper

Mailing Address 43 Eastern Ave. Apt. 3

City Lynn State MA Zip Code 01902-

Purpose of Disbursement
Internship

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80414.E10297

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

700.00

INTERNSHIP

C.

Full Name (Last, First, Middle Initial)

Barney Keller

Mailing Address 187 Lewis Rd.

City Belmont State MA Zip Code 02478-

Purpose of Disbursement
B. Keller reimbursement for parking and travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80314.E10249

Date of Disbursement

03 / 07 / 2008

Amount of Each Disbursement this Period

32.38

B. KELLER REIMBURSEMENT
FOR PARKING AND TRAVEL

SUBTOTAL of Disbursements This Page (optional)

1432.38

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Barney Keller

Mailing Address 187 Lewis Rd.

City
BelmontState
MAZip Code
02478-Purpose of Disbursement
Parking & Toll Reimbursements

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80414.E10298

Date of Disbursement

M M / D D / Y Y Y Y
0 3 / 2 4 / 2 0 0 8

Amount of Each Disbursement this Period

64.54

PARKING & TOLL REIMBURSEMENTS

B.

Full Name (Last, First, Middle Initial)

Communication, Inc. Majority

Mailing Address 274 Marconi Blvd. Suite 260

City
ColumbusState
OHZip Code
43215-Purpose of Disbursement
voter mail

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80314.E10244

Date of Disbursement

M M / D D / Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Amount of Each Disbursement this Period

3000.00

VOTER MAIL

C.

Full Name (Last, First, Middle Initial)

Boston Marriott Newton

Mailing Address 2345 Commonwealth Ave.

City
NewtonState
MAZip Code
02466-Purpose of Disbursement
Event - State committee meeting

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80314.E10247

Date of Disbursement

M M / D D / Y Y Y Y
0 3 / 0 4 / 2 0 0 8

Amount of Each Disbursement this Period

1234.10

EVENT - STATE COMMITTEE MEETING

SUBTOTAL of Disbursements This Page (optional)

4298.64

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Boston Marriott Newton

Mailing Address 2345 Commonwealth Ave.

City State Zip Code
Newton MA 02466-

Purpose of Disbursement
State Committee Meeting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80414.E10265

Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

449.61

STATE COMMITTEE MEETING

B.

Full Name (Last, First, Middle Initial)

Merchants Bankcard

Mailing Address Fleet Bank
100 Federal Street

City State Zip Code
Boston MA 02110-

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80415.E10328

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

261.88

CREDIT CARD PROCESSING FEE

C.

Full Name (Last, First, Middle Initial)

Merchants Bankcard

Mailing Address Fleet Bank
100 Federal Street

City State Zip Code
Boston MA 02110-

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80415.E10329

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

25.00

CREDIT CARD PROCESSING FEE

SUBTOTAL of Disbursements This Page (optional)

736.49

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

mindShift Technologies, Inc.

Mailing Address PO Box 200105

City
Pittsburgh

State
PA

Zip Code
15251-

Purpose of Disbursement
Computer Networking

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80414.E10276

Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

1652.00

COMPUTER NETWORKING

B.

Full Name (Last, First, Middle Initial)

Konica Minolta Business Systems

Mailing Address P.O. Box 7247-0322

City
Philadelphia

State
PA

Zip Code
19170-0322

Purpose of Disbursement
Copier

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80414.E10269

Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

708.76

COPIER

C.

Full Name (Last, First, Middle Initial)

Omni Parker House

Mailing Address 60 School Street

City
Boston

State
MA

Zip Code
02108-

Purpose of Disbursement
Event room rental and catering

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80314.E10242

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

2648.50

EVENT ROOM RENTAL AND CAT-
ERING

SUBTOTAL of Disbursements This Page (optional)

5009.26

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Ox-Eye Properties

Mailing Address c/o Massey & Co.
85 Merrimac Street

City Boston State MA Zip Code 02114-

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80314.E10237

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

3695.00

RENT

B.

Full Name (Last, First, Middle Initial)

Ox-Eye Properties

Mailing Address c/o Massey & Co.
85 Merrimac Street

City Boston State MA Zip Code 02114-

Purpose of Disbursement
Utilities

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80314.E10243

Date of Disbursement

03 / 07 / 2008

Amount of Each Disbursement this Period

831.96

UTILITIES

C.

Full Name (Last, First, Middle Initial)

Ox-Eye Properties

Mailing Address c/o Massey & Co.
85 Merrimac Street

City Boston State MA Zip Code 02114-

Purpose of Disbursement
Utilities

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80414.E10281

Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

1388.09

UTILITIES

SUBTOTAL of Disbursements This Page (optional)

5915.05

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Ox-Eye Properties

Mailing Address c/o Massey & Co.
85 Merrimac Street

City Boston State MA Zip Code 02114-

Purpose of Disbursement

Rent - Premises

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80414.E10294

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

4064.50

RENT - PREMISES

B.

Full Name (Last, First, Middle Initial)

Paychex/InterPay

Mailing Address PO Box 8295

City Boston State MA Zip Code 02266-

Purpose of Disbursement

Payroll - 401k

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80314.E10257

Date of Disbursement

03 / 06 / 2008

Amount of Each Disbursement this Period

4038.46

PAYROLL - 401K

C.

Full Name (Last, First, Middle Initial)

Paychex/InterPay

Mailing Address PO Box 8295

City Boston State MA Zip Code 02266-

Purpose of Disbursement

Payroll taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80314.E10258

Date of Disbursement

03 / 06 / 2008

Amount of Each Disbursement this Period

4136.43

PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional)

12239.39

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Paychex/InterPay

Mailing Address PO Box 8295

City
Boston

State
MA

Zip Code
02266-

Purpose of Disbursement

Payroll Processing Fee

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 80414.E10322

Date of Disbursement

/ /

Amount of Each Disbursement this Period

126.24

PAYROLL PROCESSING FEE

B.

Full Name (Last, First, Middle Initial)

Paychex/InterPay

Mailing Address PO Box 8295

City
Boston

State
MA

Zip Code
02266-

Purpose of Disbursement

401k Processing Fee

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 80415.E10330

Date of Disbursement

/ /

Amount of Each Disbursement this Period

160.00

401K PROCESSING FEE

C.

Full Name (Last, First, Middle Initial)

Paychex/InterPay

Mailing Address PO Box 8295

City
Boston

State
MA

Zip Code
02266-

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 80416.E10344

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2122.48

PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional)

2408.72

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Paychex/InterPay

Mailing Address PO Box 8295

City
Boston

State
MA

Zip Code
02266-

Purpose of Disbursement
Payroll - 401k

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80415.E10338

Date of Disbursement

03 / 20 / 2008

Amount of Each Disbursement this Period

1153.85

PAYROLL - 401K

B.

Full Name (Last, First, Middle Initial)

Boston Postmaster

Mailing Address JW MCCORMACK STATION
New Chardon Street

City
Boston

State
MA

Zip Code
02114-

Purpose of Disbursement
Postage - general use

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80314.E10238

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

820.00

POSTAGE - GENERAL USE

C.

Full Name (Last, First, Middle Initial)

Jody's Quik Print

Mailing Address P.O. Box 1068

City
Middleton

State
MA

Zip Code
01949-

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80314.E10236

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

1258.42

PRINTING

SUBTOTAL of Disbursements This Page (optional)

3232.27

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Jodys Quik Print

Mailing Address P.O. Box 1068

City
Middleton

State
MA

Zip Code
01949-

Purpose of Disbursement
Printing Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80414.E10304

Date of Disbursement

/ /

Amount of Each Disbursement this Period

98.07

PRINTING EXPENSE

B.

Full Name (Last, First, Middle Initial)

Steven Roche

Mailing Address 4 Leblanc Rd.

City
Danvers

State
MA

Zip Code
01923-

Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80414.E10288

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

FUNDRAISING CONSULTING SE-
RVICES

C.

Full Name (Last, First, Middle Initial)

SCM Associates

Mailing Address Steve Meyers
1283 Main Street

City
Dublin

State
NH

Zip Code
03444-

Purpose of Disbursement
Direct mail and telemarketing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80314.E10241

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4248.72

DIRECT MAIL AND TELEMARKE-
TING

SUBTOTAL of Disbursements This Page (optional)

9346.79

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

SCM Associates

Mailing Address Steve Meyers
1283 Main Street

City Dublin State NH Zip Code 03444-

Purpose of Disbursement
Direct mail and telemarketing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80314.E10239

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

1300.00

DIRECT MAIL AND TELEMARKE-
TING

B.

Full Name (Last, First, Middle Initial)

SCM Associates

Mailing Address Steve Meyers
1283 Main Street

City Dublin State NH Zip Code 03444-

Purpose of Disbursement
Direct Mail and telemarketing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80314.E10240

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

3187.50

DIRECT MAIL AND TELEMARKE-
TING

C.

Full Name (Last, First, Middle Initial)

SCM Associates

Mailing Address Steve Meyers
1283 Main Street

City Dublin State NH Zip Code 03444-

Purpose of Disbursement
Direct Mail and Telemarketing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80314.E10251

Date of Disbursement

03 / 07 / 2008

Amount of Each Disbursement this Period

845.00

DIRECT MAIL AND TELEMARKE-
TING

SUBTOTAL of Disbursements This Page (optional)

5332.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

SCM Associates

Mailing Address Steve Meyers
1283 Main Street

City Dublin State NH Zip Code 03444-

Purpose of Disbursement
Direct mail and telemarketing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80314.E10252

Date of Disbursement

03 / 07 / 2008

Amount of Each Disbursement this Period

12112.87

**DIRECT MAIL AND TELEMARKE-
TING**

B.

Full Name (Last, First, Middle Initial)

SCM Associates

Mailing Address Steve Meyers
1283 Main Street

City Dublin State NH Zip Code 03444-

Purpose of Disbursement
Fund Raising

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80414.E10277

Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

3909.25

FUND RAISING

C.

Full Name (Last, First, Middle Initial)

Simard Printing

Mailing Address 300 Salem Street

City Woburn State MA Zip Code 01801-

Purpose of Disbursement
Mail & Data Prepping - Caucus Notice

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80414.E10295

Date of Disbursement

03 / 20 / 2008

Amount of Each Disbursement this Period

2197.62

**MAIL & DATA PREPPING - CA-
UCUS NOTICE**

SUBTOTAL of Disbursements This Page (optional)

18219.74

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Staples, Inc.

Mailing Address Staples Credit Plan
Dept. 80 - 0088936796

City Des Moines State IA Zip Code 50368-9020

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80314.E10233

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

43.34

OFFICE SUPPLIES

B.

Full Name (Last, First, Middle Initial)

Staples, Inc.

Mailing Address Staples Credit Plan
Dept. 80 - 0088936796

City Des Moines State IA Zip Code 50368-9020

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80414.E10303

Date of Disbursement

03 / 28 / 2008

Amount of Each Disbursement this Period

670.98

OFFICE SUPPLIES

C.

Full Name (Last, First, Middle Initial)

T-Mobile T-Mobile

Mailing Address PO Box 790047

City Saint Louis State MO Zip Code 63179-

Purpose of Disbursement
Phone services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80314.E10245

Date of Disbursement

03 / 07 / 2008

Amount of Each Disbursement this Period

434.84

PHONE SERVICES

SUBTOTAL of Disbursements This Page (optional)

1149.16

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Massachusetts Republican State Congressional Committee

REIMBURSEMENT FOR PARKING

REIMBURSEMENT:SEE BELOW

MEMO: P.TORKILDSSEN REIMBURSEMENT FOR LODGING

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 37 / 44

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Peter Torkildsen

Mailing Address 1 Stony Brook Road

City
Chelmsford

State
MA

Zip Code
01863-

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80415.E10335

Date of Disbursement

03 / 20 / 2008

Amount of Each Disbursement this Period

806.31

PAYROLL

B.

Full Name (Last, First, Middle Initial)

Verizon Internet Services

Mailing Address PO Box 101096

City
Atlanta

State
GA

Zip Code
30392-

Purpose of Disbursement
Internet Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80415.E10331

Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

767.62

INTERNET SERVICE

C.

Full Name (Last, First, Middle Initial)

Verizon Verizon Wireless

Mailing Address PO Box 5029

City
Wallingford

State
CT

Zip Code
06492-

Purpose of Disbursement
Phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80415.E10332

Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

504.45

PHONE

SUBTOTAL of Disbursements This Page (optional)

2078.38

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 38 / 44

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Robert Willington

Mailing Address 12 Arlington Street

City
Reading

State
MA

Zip Code
01867-

Purpose of Disbursement

R. Willington reimbursement for parking food and travel

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 80314.E10248

Date of Disbursement

/ /

Amount of Each Disbursement this Period

412.70

R. WILLINGTON REIMBURSEMENT FOR PARKING FOOD AND TRAVEL

B.

Full Name (Last, First, Middle Initial)

Robert Willington

Mailing Address 12 Arlington Street

City
Reading

State
MA

Zip Code
01867-

Purpose of Disbursement

Reimbursement for Train & Toll Expenditures

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 80414.E10286

Date of Disbursement

/ /

Amount of Each Disbursement this Period

247.70

REIMBURSEMENT FOR TRAIN & TOLL EXPENDITURES

C.

Full Name (Last, First, Middle Initial)

Robert Willington

Mailing Address 12 Arlington Street

City
Reading

State
MA

Zip Code
01867-

Purpose of Disbursement

Train Cab & Lunch Exp Reimbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 80414.E10300

Date of Disbursement

/ /

Amount of Each Disbursement this Period

104.00

TRAIN CAB & LUNCH EXP REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional)

764.40

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 39 / 44

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Robert Willington

Mailing Address 12 Arlington Street

City
Reading

State
MA

Zip Code
01867-

Purpose of Disbursement
Train & Cab Fare Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80414.E10299

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	0	8

Amount of Each Disbursement this Period

77.00

TRAIN & CAB FARE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional)

77.00

TOTAL This Period (last page this line number only)

80843.68

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Mass Republican State Committee

Mailing Address 85 Merrimac Street
Suite 400

City Boston State MA Zip Code 02114-

Purpose of Disbursement
C. Collins remedying excessive contrib ref:May 2007 report

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80414.E10307

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	8

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 / 44

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Bruce Harrison

Mailing Address 101 Elm St

City
WakefieldState
MAZip Code
01880-Purpose of Disbursement
Administration service

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80314.E10246

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	4	/	2	0	0	8

Amount of Each Disbursement this Period

1000.00

ADMINISTRATION SERVICE

B.

Full Name (Last, First, Middle Initial)

Lyndsay Jones

Mailing Address 16 Oval Road

City
QuincyState
MAZip Code
02170-Purpose of Disbursement
Payroll

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80314.E10253

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	6	/	2	0	0	8

Amount of Each Disbursement this Period

1260.12

PAYROLL

C.

Full Name (Last, First, Middle Initial)

Lyndsay Jones

Mailing Address 16 Oval Road

City
QuincyState
MAZip Code
02170-Purpose of Disbursement
Payroll

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80415.E10334

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	0	8

Amount of Each Disbursement this Period

1260.12

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

3520.24

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Barney Keller

Mailing Address 187 Lewis Rd.

City
Belmont

State
MA

Zip Code
02478-

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80414.E10285

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1088.57

PAYROLL

B.

Full Name (Last, First, Middle Initial)

Peter Torkildsen

Mailing Address 1 Stony Brook Road

City
Chelmsford

State
MA

Zip Code
01863-

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80314.E10254

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2379.11

PAYROLL

C.

Full Name (Last, First, Middle Initial)

Robert Willington

Mailing Address 12 Arlington Street

City
Reading

State
MA

Zip Code
01867-

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80314.E10255

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1430.52

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

4898.20

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Robert Willington

Mailing Address 12 Arlington Street

City
Reading

State
MA

Zip Code
01867-

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80415.E10336

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1430.52

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1430.52

TOTAL This Period (last page this line number only)

9848.96

Image# 28993922485

Form/Schedule: **F3XA**

Transaction ID:

All donors who have contributed \$200 or more were sent a letter within 30 days asking for employer-occupation if one was not provided in order to meet best efforts policy.
